



## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	2876
Suggested Classification::	235/379
Title::	CASH DISPENSING AUTOMATED BANKING MACHINE WITH TILT OUT FASCIA
Attorney Docket Number::	D-1221 R5
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	39
Total Drawing Sheets::	97
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name::  
Family Name:: Douglass  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1037 Bel Air Drive NW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name::  
Family Name:: Booth  
Name Suffix::  
City of Residence:: Kimbolton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 13223 Egress Road  
City of mailing address:: Kimbolton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 43749

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: MX  
Status:: Full Capacity  
Given Name:: Pedro  
Middle Name::  
Family Name:: Tula  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1118 Lindylane Ave. SW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Correspondence Information**

Correspondence Customer Number:: 28995

**Representative Information**

Representative Customer Number:	28995
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Date Filing::
This Application	An application claiming the benefit under 35 USC 119(e)	60/453,667	03/10/2003

**Assignee Information**

Assignee Name:: Diebold Self-Service Systems  
Division of Diebold, Incorporated  
City of mailing address:: North Canton  
State or Province of mailing address:: OH